- van		Nebster S
FOR INSTRUCTIONS, SEE BACK OF FORM	· ·	FORM STATEMENT
CHECK ONE:		DR-1 OF ORGANIZATION
This is an initial* Statement of Organization This is an amended* Statement of Organization		
This is an amended Statement of Organization		For Office Use Only
'An initial Statement of Organization should be filled within 10 days of the comm		Comm. # 13/35
making expenditures or incurring indebtedness exceeding \$750. Amendments s change. Penalties may be imposed for late-filed Statements of Organization.	should be filed within 30 days of a	Indexed ob Audited
	Å,	Computer of
O'Farrell for Council COMMITTEE NAME (Required by law)		
COMMITTEE NAME (Required by law)	JAN 3 1 2003	
IMPORTANT: Indicate type of committee you are reporting for:	The state of the s	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party Committee (7) County/City Central Committee (8) Support slate of can	(4)County/Local Candidate (5)Co	ounty PAC (6) Ballot Issue/Franchise
COMMITTEE TREASURER This address used for all reminders and		nal officers on separate page)
(Required by law) correspondence)	COMMITTEE CHAIR (LISt additio	nai officers on separate page)
Name	Name	
Edwina J. O'Farrell		
Mailing Address	Mailing Address	
227 South 12th Street		
City, State Zip Code	City, State Zip Code	
Fort Dodge, IA 50501		
Phone (515) 955 - 4889	Phone ()	
e-Mail	e-Mail	
INDICATE PURPOSE OF COMMITTEE - Check One Box Adve	ocate for/against candidate(s)	Advocate for/against ballot issue(s)
Comment or description: All Candidates Enter:		F 1
Office Sought: Ward 2 - City Council	District: Webster Co	- Fort Dodge City.
Political Party (if applicable)	Year Standing for Election: 20	03-Special Election
County/Local Candidates and Local Ballot/Franchise Committees Enter County: Webster Co - Fort Dodge City Election	•	
Bank Account Name	Candidate name & Address or P	
Dank Account Name		Affiliate, or Sponsor
300405744 - O'Farrell for Council	Dennis R. O'Fa	rre 11
Name of Financial Institution/type of Account ↓↓	Mailing Address ↓ ↓	1
United Bont of Iowa	227 South 12 5	treet
Mailing Address ↓ ↓	City +	State ↓ ↓ Zip ↓ ↓
	Fort Dodge	IA 50501
City ↓ ↓ State ↓ ↓ Zip ↓ ↓	Phone (515) 955 - 48	8 21
fort Dodge IA 50501	e-Mail denedola from	
DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION Indicate disposition of funds by marking appropriate number in box:	(Statement of intent required by law for committees and committees using only	all committees, except state parties and central
(1) DONATED TOCOUNTY CENTRAL COMMITTEE	(6) PRORATED REFUND TO	
(2) DONATED TOLOCAL/STATE/NAT'L POLITICAL PARTY (unde	rline one) (7) TRANSFER TO ANOTHE	R COMMITTEE OF THIS SAME CANDIDATE
(3) DONATED TO CHARITABLE ORGANIZATION	(CANDIDATES ONLY)	
(specify) Blanden Illuse um andor Fort Todge Libr	(8) RETURN TO PARENT E	NTITY GENERAL FUND (PACS ONLY)
(4) CITY/COUNTY/SCHOOL/STATE OF IOWA GENERAL FUND (underline one)	(9) OTHER (PACs ONLY), P	LEASE BE SPECIFIC
(5) PARTISAN CONGRESSIONAL DISTRICT FUND		
STATEMENT OF AFFIRMATION BY TREASURER AND CANDIDATE; OR POLITI I am aware that I am required to file disclosure reports if the committee receis \$750.00 in a calendar year to expressly advocate for any candidate or ballot iss reports, the candidate or chairperson (PACs) is responsible under the law for act to civil penalties and possible other legal action. I understand that by filing this and administrative rules found in chapter 351. I affirm that all committee officer	ves contributions, makes expenditure sue. I understand that although the trocurate and timely disclosure reports form, I am subject to the laws found its have been informed of their appoin	s, or incurs indebtedness in excess of easurer normally prepares and files and that late-filed reports are subject n lowa Code chapter 56, chapter 688 tment and obligations.
Signature of Treasurer	Date	Signed
Signatura of Conditions OB 15000 Control Control		0)
Signature of Candidate, OR, if PAC, Central Committee or Local Ballot Issue. Chairnerson	(-